| PATENT A | APPLICATION FEE DETERMINATION | ON RECORD |
|----------|-------------------------------|-----------|
| | Effective October 1, 2000 | |

Application or Docket Number

| 2102189-9911 | |
|--------------|--|
|--------------|--|

| Claims as filed - part i | | | | | | | | SMALL ENTITY | | OTHER THAN | | |
|---|--|---|------------|--------------|----------------------------------|------------------|----------|---------------------|------------------------|------------|---------------------|------------------------|
| (Column 1) | | | (Colur | nn 2) | | TYPE _ | | OR_ | SMALL | NTITY | | |
| TOTAL CLAIMS | | 58 | | | | | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FIL | _ED | NUMBER EXTRA | | | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | 58 minu | s 20= | | | | X\$ 9= | 342 | OR | X\$18= | |
| INDEPENDENT CLAIMS 5 mi | | | 5 minu | us 3 = | * | 2 | | X40= | 1608 | OR | X80= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +135= | | OR | +270= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | OTHER | |
| | A177 E | (Column 1) | | (Colu | mn 2) | (Column 3) | | SMALL E | ENTITY | OR | SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| PAGE | Total | | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| MER | Independent | * | Minus | *** | T 01 4114 | = | | X40= | | OR | X80= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | j | +135= | | OR | +270= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Coli | ımn 2) | (Column 3) | | | | | | |
| | 7.34 (3.47) | CLAIMS | | HIG | HEST | T | | | ADDI- | | | ADDI- |
| NT B | | REMAINING AFTER AMENDMENT | | PREV | MBER TOUSLY D FOR | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| AMENDMENT | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| ME | Independent | * | Minus | *** | | = | | X40= | | OR | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | ال | +135= | | OR | +270= | | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Col | umn 2)_ | (Column 3) | <u>_</u> | | | | | |
| NT C | | CLAIMS REMAINING AFTER AMENDMENT | | NU PRE\ | HEST MBER /IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| DE | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | 7 |
| AMENDMENT | Independent | * | Minus | *** | | = | | X40= | | OR | You | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 1 | 1 | | | |
| | | | | | | | | +135= | <u> </u> | OR | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE | | | | | | | | | | OR | TOTA ADDIT. FEI | |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number of found in the appropriate box in column 1. | | | | | | | | | | | | |